

<b>CLAIMS ONLY</b>						SERIAL NO.	FILING DATE			
						APPLICANT(S)				
<b>CLAIMS</b>										
	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT		*	*	*	
	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
1							51			
2							52			
3							53			
4							54			
5							55			
6							56			
7							57			
8							58			
9							59			
10							60			
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12							62			
13							63			
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32							82			
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36							86			
37							87			
38							88			
39							89			
40							90			
41							91			
42							92			
43							93			
44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
TOTAL IND.	2		1		1		TOTAL IND.	1		1
TOTAL DEP.	1	1	1	1	1	1	TOTAL DEP.	1	1	1
TOTAL CLAIMS	3		2		2		TOTAL CLAIMS	3		3

\* MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS